

PRINTED: 04/27/2017
FORM APPROVED

Division of Health Care Facilities

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: TN5801	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 02 - STATE BUILDING B. WING: _____	(X3) DATE SURVEY COMPLETED 04/25/2017
NAME OF PROVIDER OR SUPPLIER BRIDGE AT SOUTH PITTSBURG, THE		STREET ADDRESS, CITY, STATE, ZIP CODE 201 EAST 10TH STREET SOUTH PITTSBURG, TN 37380		
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
N 831	1200-8-6-.08 (1) Building Standards (1) A nursing home shall construct, arrange, and maintain the condition of the physical plant and the overall nursing home environment in such a manner that the safety and well-being of the residents are assured. This Rule is not met as evidenced by: Based on observations, the facility failed to maintain the physical environment. The finding included: Observation on 4/25/17 at 2:27 PM-3:24 PM, revealed wall damage in the following locations: a. Nurse station 2 hot water heater room b. Nurse station 2 ice machine room The maintenance director was present when this deficiency was identified and it was later acknowledged by the administrator during the exit conference on 4/25/17.	N 831	Residents Affected/Potentially Affected: No residents were affected by this cited practice. All residents have the potential to be affected by the cited practice. The Maintenance Director completed all repairs immediately. Systemic Measures: The Maintenance Director repaired immediately identified wall damage And will monitor Station 2 hot water heater room and Station 2 ice machine room monthly to ensure compliance is maintained. Monitoring Measures: The Maintenance Director will report any identified related concern immediately to the Administrator. All concerns will be addressed in the monthly QA x 3 months for recommendations and further follow up as indicated to ensure compliance is maintained.	05/30/2017
N 848	1200-8-6-.08 (18) Building Standards (18) It shall be demonstrated through the submission of plans and specifications that in each nursing home a negative air pressure shall be maintained in the soiled utility area, toilet room, janitor's closet, dishwashing and other such soiled spaces, and a positive air pressure shall be maintained in all clean areas including, but not limited to, clean linen rooms and clean utility rooms.	N 848	Residents Affected/Potentially Affected: No resident were affected by this cited practice. All resident have the potential to be affected by the cited deficient practice	05/30/2017

Division of Health Care Facilities
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

STATE FORM

6802

LVQK21

If continuation sheet 1 of 1

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NAME OF PROVIDER OR SUPPLIER

STREET ADDRESS, CITY, STATE, ZIP CODE

BRIDGE AT SOUTH PITTSBURG, THE

201 EAST 10TH STREET
SOUTH PITTSBURG, TN 37380

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N 848	<p>Continued From page 1</p> <p>This Rule is not met as evidenced by: Based on observations, the facility failed to maintain the correct air flow in the required areas.</p> <p>The findings included:</p> <ol style="list-style-type: none"> 1. Observation on 4/25/17 at 3:48 PM, revealed chemical storage in the kitchen janitors closet with no negative air flow. 2. Observation on 4/25/17 at 4:01 PM, revealed the clean side (dryer) room had negative air pressure flowing from the dirty side (washers) room. <p>The maintenance director was present when these deficiencies were identified and they were later acknowledged by the administrator during the exit conference on 4/25/17.</p>	N 848	<p>Systemic Measures</p> <p>The Maintenance Director immediately notified Service Now Heating & Air Company regarding cited concern. The Maintenance Director will monitor negative pressure monthly.</p> <p>Monitoring Measuring</p> <p>The Maintenance Director will report any identified related concern immediately to the Administrator. All concerns will be addressed in the monthly QA x 3 months for recommendations and further follow up as indicated to ensure compliance is maintained.</p>	05/30/2017